

GER - Gastroesophageal Reflux Disease

GER-DP DISEASE PROCESS

OUTCOME: The patient will understand the anatomy and pathophysiology of gastroesophageal reflux disease (GERD).

STANDARDS:

1. Explain the anatomy and physiology of the esophagus and stomach.
2. Explain the process of acid reflux into the esophagus.
3. Explain how and why stomach acid reflux into the esophagus causes pain and disease.
4. Explain long-term complications of untreated GERD including carcinoma of the esophagus.

GER-FU FOLLOW-UP

OUTCOME: The patient/family will understand the importance of follow-up and make a plan to keep follow-up appointments.

STANDARDS:

1. Discuss the importance of follow-up care.
2. Discuss the procedure for obtaining follow-up appointments.
3. Emphasize that appointments should be kept.

GER-L LITERATURE

OUTCOME: The patient/family will receive written information about gastroesophageal reflux disease.

STANDARDS:

1. Provide parent/family with literature on gastroesophageal reflux disease.
2. Discuss the content of the literature.

GER-LA LIFESTYLE ADAPTATIONS

OUTCOME: The patient and/or family will understand how to control GERD through lifestyle adaptation.

PATIENT EDUCATION PROTOCOLS:**GER - GASTROESOPHAGEAL REFLUX DISEASE**

STANDARDS:

1. Emphasize the importance of tobacco cessation and decreased alcohol consumption.
2. Identify obesity as a major exacerbating factor in GERD. **Refer to GER-N.**
3. Discuss physical control measures such as elevating the head of the bed.

GER-M MEDICATIONS

OUTCOME: The patient/family will understand the purpose, proper use, and expected outcomes of prescribed drug therapy.

STANDARDS:

1. Describe the name, strength, purpose, dosing directions, and storage of the medication.
2. Discuss the risks, benefits, and common or important side effects of the medication and follow up as appropriate.
3. Discuss any significant drug/drug, drug/food, and alcohol interactions, as appropriate.
4. Discuss the importance of keeping a list of all current prescriptions and over-the-counter medicines, vitamins, herbs, traditional remedies, and supplements. Encourage the patient to bring this list and pill bottles to appointments for medication reconciliation.

GER-MNT MEDICAL NUTRITION THERAPY

OUTCOME: The patient and family will understand the specific nutritional intervention(s) needed for treatment or management of gastroesophageal reflux disease.

STANDARDS:

1. Explain that Medical Nutrition Therapy (MNT) is a systematic nutrition care process provided by a Registered Dietitian (RD) that consists of the following:
 - a. Assessment of the nutrition related condition.
 - b. Identification of the patient's nutritional problem.
 - c. Identification of a specific nutrition intervention therapy plan.
 - d. Evaluation of the patient's nutritional care outcomes.
 - e. Reassessment as needed.
2. Review the basic nutrition recommendations for the treatment plan.
3. Discuss the benefits of nutrition and exercise to health and well-being.
4. Assist the patient/family in developing an appropriate nutrition care plan.

PATIENT EDUCATION PROTOCOLS:**GER - GASTROESOPHAGEAL REFLUX DISEASE**

5. Refer to other providers or community resources as needed.

GER-N NUTRITION

OUTCOME: The patient will understand the role of nutrition and gastroesophageal reflux disease.

STANDARDS:

1. Review normal nutritional needs for optimal health.
2. Explain the benefits of weight loss, low fat diet, and small frequent meals.
3. Explain that spicy or high acidic foods may worsen condition. Examples include tomatoes, chili, citrus fruits and juices, chocolate, peppermint, onions, garlic, alcohol, coffee, etc.
4. Discourage late evening meals and snacks. Instruct the patient to maintain an upright position for 2 hours after eating. Elevating the head of the bed at night may also be beneficial.
5. Discuss nutritional modifications as related to GER. Refer to a registered dietitian for MNT as appropriate.

GER-PM PAIN MANAGEMENT

OUTCOME: The patient/family will understand the plan for pain management.

STANDARDS:

1. Explain the pain scale and how it is used to assess the degree of pain individuals are experiencing. Discuss its use in developing a plan to manage pain.
2. Explain that pain management is specific to the disease process of this particular diagnosis and may be multifaceted. **Refer to PM.**
3. Explain that administration of fluids may be helpful with pain relief and resolution of symptoms.
4. Explain non-pharmacologic measures that may be helpful with pain control, e.g., sit upright, loosen clothing, breathe deeply.

GER-SM STRESS MANAGEMENT

OUTCOME: The patient will understand the role of stress management in gastroesophageal reflux disease.

STANDARDS:

1. Discuss that stress may exacerbate adverse health behaviors such as increased tobacco, alcohol, or other substance use as well as overeating, all of which can increase the risk of morbidity from gastroesophageal reflux disease.

PATIENT EDUCATION PROTOCOLS:**GER - GASTROESOPHAGEAL REFLUX DISEASE**

2. Explain that effective stress management may help reduce the severity of gastroesophageal reflux disease, as well as help improve the health and well-being of the patient.
3. Discuss various stress management strategies which may help maintain a healthy lifestyle. Examples may include:
 - a. Becoming aware of your own reactions to stress
 - b. Recognizing and accepting your limits
 - c. Talking with people you trust about your worries or problems
 - d. Setting realistic goals
 - e. Getting enough sleep
 - f. Maintaining a healthy diet
 - g. Exercising regularly
 - h. Taking vacations
 - i. Practicing meditation, self hypnosis, and positive imagery.
 - j. Practicing physical relaxation methods such as deep breathing or progressive muscular relaxation
 - k. Participating in spiritual or cultural activities
4. Provide referrals as appropriate.

GER-TE TESTS

OUTCOME: The patient/family will understand the tests to be performed.

STANDARDS:

1. Explain the necessity, benefits and risks of the test to be performed and how it relates to the course of treatment.
2. Explain any necessary preparation and instructions for the test ordered.
 - a. Explain that upper gastrointestinal barium studies is an x-ray to assess the degree and extent of the disease.
 - b. Discuss the test(s) for H. Pylori and how testing may assist in diagnosis and treatment.
 - c. Discuss as appropriate the procedure for EGD. **Refer to SPE.**
3. Explain the meaning of the test results, as appropriate.

GER-TX TREATMENT

OUTCOME: The patient/family will understand the treatment options and will participate in the design of the treatment plan, goals, and expected results.

PATIENT EDUCATION PROTOCOLS:**GER - GASTROESOPHAGEAL REFLUX DISEASE**

STANDARDS:

1. Explain that the treatment plan will be made by the patient and medical team after reviewing available options. Discuss with the patient/family the possible appropriate procedural or operative pain management techniques, e.g., medications, non- pharmacological, and surgical.
2. Discuss the treatment plan, including lifestyle adaptations, pharmacologic, surgical, and psychosocial aspects of the treatment plan.
3. Discuss the importance of fully participating in the treatment plan, including scheduled follow-up and physical therapy.